UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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## FORM D

JUN 23 2008 washington, DC

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

143	84	49
OMB	APPR	OVÁL
OMB Num	ber:	3235-0076
Expires:	April	30,2008 le burden
Estimated	averag	e burden
nours per r	espons	se 16.00

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E RECEIVED					

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  STORAGE SOLUTIONS PERRY ROAD ACQUISITIONS, L. P.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	1/0 Tim (1991) (Tim (1991) (Time 1992) (Hall 1992)
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  STORAGE SOLUTIONS PERRY ROAD ACQUISITIONS, L. P.	08053626
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
225 South Lake Avenue, Suite 630, Pasadena, California 91101	(626) 796-8700
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Ownership of self-storage facility located in Houston, Texas	
Type of Business Organization  corporation business trust  Limited partnership, already formed business trust  limited partnership, to be formed	please specify): PROCESSED
Month Year  Actual or Estimated Date of Incorporation or Organization: 0 5 07 ✓ Actual ☐ Estir	JUN 2 5 2008
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State  CN for Canada; FN for other foreign jurisdiction)	
CENEDAL INSTRUCTIONS	

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

,			A. BASIC ID	ENTIFICATION DATA		
2. En	iter the information re	equested for the fol	lowing:			
•	Each promoter of t	the issuer, if the iss	suer has been organized w	rithin the past five years;		
•	Each beneficial ow	ner having the pow	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
•	Each executive off	icer and director o	f corporate issuers and of	corporate general and mai	naging partners of	partnership issuers; and
•	Each general and s	nanaging partner o	f partnership issuers.			
Check I	Box(es) that Apply:	<b>₽</b> Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
	me (Last name first, reen Realty Group				· · · · · · · · · · · · · · · · · · ·	
Busines 225 S	ss or Residence Addre outh Lake Avenue	ess (Number and Suite 630, Pasa	Street, City, State, Zip Cadena, California 9110	ode) 11		
Check !	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Na	me (Last name first,	if individual)				
Busines	ss or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Check 1	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Na	ume (Last name first,	if individual)				
Busines	ss or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Na	ame (Last name first,	if individual)	· <u> </u>	···		
Busine	ss or Residence Addr	ess (Number and	Street, City, State, Zip C	ode)		
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Na	ame (Last name first,	if individual)				
Busine	ss or Residence Addr	ess (Number and	Street, City, State, Zip C	Code)		
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Na	ame (Last name first,	if individual)				
Busine	ss or Residence Addr	ess (Number and	Street, City, State, Zip C	Code)		
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Na	ame (Last name first,	if individual)	· · · · · · · · · · · · · · · · · · ·			
Busine	ss or Residence Addr	ess (Number and	Street, City, State, Zip C	Code)		
		(Use bl	ank sheet, or copy and use	e additional copies of this	sheet, as necessary	·)

$\Gamma$					B. 1N	FORMATI	ON ABOU	T OFFERI	NG				
1,	Hae the	issuer cold	, or does th	ne issuer i	ntend to sel	l to non-a	ccredited in	nvestors in	this offeri	ng?		Yes	No <b>X</b>
٠.	1143 (116	issuel SUIC	, or uoes it			Appendix,						E!	<u> </u>
2.	What is	the minim	um investm			•	ny individ				•••••	\$_ <sup>2,0</sup>	50,000.00
3.	Does the	a affering :	permit joint	ownerchi	n of a sing	le unit?	11					Yes	No <b>X</b>
<i>3.</i> 4.	Enter th	e informat	ion request	ed for eac	h person w	ho has bee	n or will b	e paid or g	given, dire	ctly or ind	irectly, any		
	commiss If a pers or states	sion or sim on to be lis s, list the na	ilar remune ted is an ass	ration for s sociated pe roker or de	solicitation erson or age caler. If mo	of purchase nt of a brok ore than five	ers in conne er or deale e (5) persor	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in tl EC and/or	he offering. with a state ons of such		
	l Name (I nni Broke		first, if indi	vidual)			••						
Bus 105	siness or 1 542 South	Residence n Jordan G	Address (N	umber and uite 330, S	d Street, Ci Salt Lake C	ty, State, Z lity, Utah 8	ip Code) 4095	_	<del></del>				<del></del>
	me of Ass ron Meo	sociated Br	oker or Dea	aler					·				
Sta			Listed Has										
	(Check	"All States	" or check	individual	States)	****************							States
	AL	AK	AZ	AR	GA	CO	CT	DE	DC	FL	GA	HI	[D]
	IL MT	[IN] [NE]	IA NV	KS]	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful Or	II Name (I mni Broke	Last name erage	first, if indi	ividual)				-					
Bu 05	siness or 542 South	Residence Jordan G	Address (1 ateway, St	Number an uite 330, S	d Street, C Salt Lake C	ity, State, 2 ity, Utah 8	Zip Code) 4095				2.12.11		
	me of Ass hn Starke		oker or De	aler									
Sta			Listed Has										
	(Check	"All States	or check	individual	l States)		***************************************		***************************************		***************************************	☐ AI	States
	AL	AK	AZ	AR	GA.	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	$\overline{WY}$	PR
Ful	II Name (	Last name	first, if ind	ividual)	<u> </u>								
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)	<u></u>					
Na	me of Ass	sociated B	oker or De	aler				-			-		
Sta	ites in Wh	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers				<u> </u>		
	(Check	"All State:	s" or check	indiviđua	l States)							☐ Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	IN	IA	KS	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	MT RI	NE SC	NV SD	NH TN	TX	UT	VT	VA	WA	$\overline{\mathbb{W}}$	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

١.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \) and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.	Aggregate Offering Price	Amount Already Sold
	Type of Security	_	
	Debt		
	Equity		\$
	Common Preferred		
	Convertible Securities (including warrants)		\$
	Partnership Interests		\$
	Other (Specify Tenant-in-common interests	2,050,000.00	\$ 2,050,000.00
	Total	2,050,000.00	<u>\$_2,050,000.00</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	4	\$_2,050,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	·	\$
	Regulation A		\$
	Rule 504		\$
			\$ 0.00
	Total		\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$_50,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$ 164,000.00
	Other Expenses (identify)		\$
	Total		\$_214,000.00

5.	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross		
5.	proceeds to the issuer."		\$
	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	\$ 155,000.0C	
	Purchase of real estate	] <b>\$</b>	\$_1,136,000.00
	Purchase, rental or leasing and installation of machinery and equipment	]\$	\$
	Construction or leasing of plant buildings and facilities	]\$	<u> </u>
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	٦\$	□\$
	Repayment of indebtedness	_	
	Working capital	<del></del> "	
	Other (specify): Capital Improvement Reserves		
		]\$	\$
	Column Totals	\$ 155,000.00	\$ 1,681,000.0
	Total Payments Listed (column totals added)		836,000.00
	D. FEDERAL SIGNATURE		
sign	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commiss information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of R	sion, upon writter	le 505, the following n request of its staff,
Issu	er (Print or Type) Signature	Date / /	
ST	ORAGE SOLUTIONS PERRY ROAD ACQUISITI	6/6/08	
Nan	me of Signer (Print or Type)  Title of Signer (Print or Type)		
	Luke V. M. Carthy Manager		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No <b>X</b>
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is f D (17 CFR 239.500) at such times as required by state law.	iled a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informatissuer to offerees.	tion furn	ished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be enlimited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer clai of this exemption has the burden of establishing that these conditions have been satisfied.		
	uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its beha thorized person.	If by the	undersigned
Issuer (	Print or Type) Signature Date		
STORA	AGE SOLUTIONS PERRY ROAD ACQUISITIO $Wuv-M-M$	3	
Name (	Print or Type)  Title (Print or Type)  Manere co		

END

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.